

SOCIAL WORKERS MEETING THE CHALLENGE



FROM THE DESK OF
JILL MANSKE, ACSW, LISW
DIRECTOR,
SOCIAL WORK SERVICE
VA CENTRAL OFFICE

For many years, VHA social workers have volunteered to help with disaster relief efforts, including the Oklahoma City bombing, September 11th, floods, tornadoes and hurricanes. Many have

been trained by the American Red Cross or completed other disaster response training. So, it was no surprise that when asked to volunteer for deployments to help veterans and non-veterans impacted by Hurricanes Katrina, Rita and Wilma, social workers stepped forward in record numbers. All it took was an e-mail message sent to the Social Work chiefs and executives, and the VHA Emergency Management Strategic Health Group was inundated with volunteers.

Hurricane relief efforts presented new challenges and required different skills. Many of the social worker volunteers found that they were doing much less mental health counseling and much more basic social work – finding housing, reuniting families, referring for community services, assisting with financial and legal problems – than they expected to do. But they rolled up their sleeves and did whatever needed to be done.

This special edition of Synergy focuses on these social worker volunteers and their stories. You will read about phenomenal need and the phenomenal effort by social workers to help. You will read about life-altering experiences and getting back to Social Work roots. You will be proud and you will be moved, maybe even to the point of tears.

These social worker volunteers made a huge difference in the lives of countless veterans, their families, and friends. They worked long hours, often in less than ideal environments. They had to be creative when resources did not exist and they had to use all of their community organization and systems training. And they did all of this with great skill and positive attitudes. I could not be more proud of VHA social workers than I am today. "Thank you" seems insufficient. Those of you who volunteered for deployments are true heroes!



Photo donated by Martha G.

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Editor's Note: I want to thank everyone involved in putting this edition together. Synergy Roving Reporters and National PR Committee Members volunteered to interview and compile these stories. As you can see, the response from social workers across the country to tell their story was tremendous. In order to include everyone many of the submissions had to be cut in length, however the content still rings through.

IMMEDIATE RESPONSE TO HURRICANE KATRINA - GULFPORT HEALTHCARE SYSTEM

Submitted by: Alan Cooper, LCSW, MPH Chief, SW Gulf Coast VAHCS Biloxi, MS



At the Gulf Coast VA Health Care System, Hurricane Katrina caused numerous challenges. Initially, the biggest challenge immediately preceding the hurricane was the tremendous influx of veterans and community members utilizing the ER. To address this need, a 24/7 triage was set up to move evacuees quickly to regular and special needs shelters. This involved outreach to the different shelters to establish a liaison and to assist them with issues effecting veteran evacuees. The next was to account for the large number of veterans residing in community programs. Almost immediately, Community Residential Care social workers traveled to every community care home (29 homes with 130 veterans) to assure all of them were safe. Again, this had to be accomplished in person because no land or cell phone service was operable. This was further complicated with debris on the roads. Several homes in the Pass Christian and Bay St Louis

area had been completely destroyed and the veterans residing in these homes were re-located to other homes. This was accomplished within one week after the storm by social workers assigned to MHICM and HBHC. Another challenge was the loss of Gulfport Hospital. Quickly, space, furniture and IT equipment had to be found at the Biloxi Hospital for 12 social workers assigned to Psychiatry, Dementia Unit, Community Residential Care and some specialty program social workers.

With all this, the biggest challenge was helping our own staff. Of the 27 full-time social workers assigned to the Biloxi and Gulfport Hospitals and the Mobile Clinic, 40% had a total loss of home or a home that was not habitable until major repairs were done and another 40% had minor damage (usually some roof damage). Many who had a total loss resided in their office for a significant period of time. Time was allowed for employee assistance, meeting with insurance adjusters, FEMA, and Red Cross. Social Work, with Psychology and Chaplain Services, were instrumental in establishing an employee assistance center in the Biloxi VA Recreation Hall and getting social work counselors from other VA's to staff it.



Gulfport VA - photo taken by Mary LePage

EVACUEES TO HOUSTON

Submitted by: Miguel Ortega, LCSW, SW Exec. Michael E. DeBakey VAMC, Houston

Even without a centralized Social Work Service, social workers responded as a cohesive and unified presence in all areas at the Michael E. DeBakey VA Medical Center in Houston TX. Social workers were actively involved in the PRT (Patient Reception Teams) at Ellington Field. We coordinated the search for resources and utilized our student interns to help update the resources sheets daily.

"We have cried in pain and cried for joy with these men, women and children as we've heard how they were separated from loved ones and how we have helped them be reunited with them. Take this opportunity to do something meaningful and have your skills and talents received with gratitude, which will energize you for years to come. Yes, it's hard work, yes it's tiring, but it is also rewarding, challenging and meaningful"

September 6, 2005 - a message to his staff.
Miguel Ortega, LCSW Social Work Executive
Michael E. DeBakey VA Medical Center, Houston TX

The Employee Assistance Program, for returning staff from Ellington and staff working late shifts, was made available by **Audrey Dawkins-Oliver, LCSW**, who worked practically 24 hours a day for over a week. Social workers from all care lines reported to duty in their assigned areas and then volunteered after their tours in the ER/Triage to keep things going 24 hours a day, 7 days a week.

The social workers in our HCHV program, directed by **George Castillo, LCSW**, provided outreach not only to the major shelters but also went to the smaller churches and community organization shelters to outreach to veterans and their families. They drove a group of veterans back to New Orleans to retrieve their belongings from a residential care facility and brought them back to their new transitional housing unit in Houston. The staff from the Mental Health Care Line, including **Lori Coonan, LCSW**, began our coverage at our New Orleans VA Outpatient Clinic in Houston, with all staff rotating coverage during the past two months to make services

available. A group of staff made arrangements after Hurricane Rita to welcome a group of veterans who had been evacuated to Oklahoma. To even begin to tell you how everyone showed what social workers can do with their ability to assess, plan and intervene would be unfair to those I may have not seen working in areas I did not have a chance to go by. It is a good feeling to know that everything was being cared for without having to watch it directly. There are many more I would like to single out by name, but the list would take up the page. They all know how proud the facility's leadership and the Practice Council is of them. I want to thank them all again.

FIRST STOP: ELLINGTON FIELD

Submitted by: Linda Avery, LCSW and Kathy Molitor, LCSW Michael E. DeBakey Houston VAMC, TX



Photo sent by Miguel Ortega

At the beginning of 2005, when we accepted assignments for the Patient Reception Team (PRT), attending meetings and practice drills felt much like the fire drills we have all done since childhood – going through the motions for something you'd probably never use. After Hurricane Katrina devastated New Orleans and the Gulf Coast, the drill suddenly became a reality. We received instructions to come into work on August 31, 2005. The call came at 3:00 p.m., to set up to meet the first plane from New Orleans at 6:00 p.m. at Ellington Field.

Michael E. DeBakey VAMC (MEDVAMC) moved supplies, equipment and personnel to Ellington Field and activated the PRT. Four triage stations were set-up. Outside of the hanger a line of ambulances stretched down one side of a long block, while a line of Metrolift vans and buses stretched down the other side.

We arrived at Ellington Field that afternoon, expecting to receive approximately 80 veteran inpatients from the New Orleans VAMC. By 6:30 a.m. the next morning, the PRT had received five C-130 military transport aircrafts, triaged and distributed

188 patients to Houston area hospitals and the MEDVAMC. With more flights expected to arrive, all of the disciplines involved organized into 8-12 hour shifts. We called on our social work colleagues at MEDVAMC for relief and support. Over the next 4 days, the PRT triaged 726 patients from 21 military transport flights, admitting approximately 100 patients to the MEDVAMC, and the rest to Houston area hospitals and shelters. Most evacuees were in a daze, with no complaints, thankful that they were out of harm's way at last. This was a first plane trip for many. Often people spoke of being rescued from their homes first by boat and then by helicopter, boarding a plane and having no idea where they would eventually land.

The evacuees ranged in age from four months to 80 years and generally suffered from dehydration and fatigue. Several patients needed emergency dialysis and treatment for infections while ventilator-dependent patients were transported directly to awaiting ambulances. As the days wore on, the people who arrived had been without food, water, dry clothes, and comfort for longer and longer periods of time. We were asked to find available shelters in the middle of the night with only our cell phones and the command center to assist us. We debriefed with each other after our shifts. We laughed, we cried and realized the need and value of peer support.

The story of 2 year-old Wayne says it best. Wayne was with his mother, aunt and 3 other children. Wayne had eaten "hurricane food" (donuts, etc) and was sitting on a folding chair crying. The women sat dazed as Wayne cried, unable to console him any longer. We offered to hold him. Wayne's mother stared blankly as if to indicate she had no energy left. Linda picked him up and held him tightly. He immediately fell asleep in the comfort of her arms and stayed there until she had to place him on the bus with his mother.

Social workers make assessments and find resources daily, but this experience showed us the most basic of human needs and called upon some often dormant, but not forgotten skills.



Photo sent by Miguel Ortega

MEDICAL EVACUATIONS TO ATLANTA

Submitted by Bruce Rooney, MSW, LCSW, SW Executive, Atlanta VAMC, GA



Atlanta VAMC began operations in preparation for Hurricane Katrina evacuees on 9/1/05. On Friday, 9/2/05 we worked with 5 Air Force flights carrying hospitalized and nursing home patients. On 9/2/05, the end of medical/nursing home evacuations were declared and the Atlanta VA effort, for the most part, was deactivated.

Atlanta VAMC social workers were recruited with the understanding "You just do whatever needs to be done" - pass out bottles of water - wheel patients on gurneys - kneel down to assure folks that they were safe – support staff working 24-36 hour shifts.

"It was absolutely emotionally gut-wrenching to see these poor souls, many who were elderly nursing home patients who didn't know where they were or what had happened."

The next phase in our operation was helping evacuees with:

- Social Security checks, VA checks, food vouchers
- Housing – public, private and donated
- Placement in shelters/apartments/houses
- Assistance in locating lost family members.

By 9/6/05 we had triaged 1500 "evacuees" with approximately 600 needing medical attention.

"In 28 years with the VA, I have never been so proud of all of our staff."

DC SOCIAL WORKERS PROVIDE ASSISTANCE

Submitted by: Debbie Amdur, LCSW Chief, SW Service Washington D.C. VAMC

On Thursday, September 1, 2005, over 400 frail and overwhelmed residents from the Armed Forces Retirement Home (AFRH) in Gulfport Mississippi arrived in a convoy of buses at the AFRH in Washington D.C., across the street from the Washington D.C. VAMC. A small group of retirees arrived by plane the next day, and another bus of 33 AFRH residents arrived at 6 pm September 5th. They arrived with a small suitcase of belongings, most with no medications or medical records. They had spent two days in their Gulf Port facility with no electricity – moving to higher floors as the lower floors flooded. Many had not been able to notify family members of their whereabouts, and quite a few did not know if their loved ones had made it out safely.

Any facility would be overwhelmed by the arrival of over 400 new residents. Since we work regularly with the AFRH, we were aware this living environment was intended for independent residents. We realized immediately that help would be needed.

Social workers from the VAMC worked side by side with AFRH staff, VA physicians, and VA nurses to provide support, assistance and whatever 'hands on' help was needed. We helped set up a medication distribution system, assisted in triaging the evacuees to appropriate shelter/housing settings, used our cell phones to connect to families, made runs to the hospital to pick up supplies and provided reassurance. We saw incredible examples of the strength of the human spirit among these veterans. There were some amazing moments.

"I worked with a couple who had been separated. The husband arrived on the first busload, his wife had been left behind in a hospital in Gulf Port, having just finished chemotherapy. She arrived 4 days later. Seeing the two of them re-united will be one of those images that I will always carry with me."

The following week, we received news that evacuees from New Orleans were arriving at the D.C. Armory. Among this group were about 50 veterans. Social work staff were deployed to the Armory and worked with staff from VBA to assure that all veterans were provided services.

"As a Service Chief, it was very rewarding to see the dedication and commitment of my staff during this crisis. As the weeks go on we have frequent calls and visits from these veterans....which makes us realize that we did make a difference."

DEVESTATION AND RESILIENCE IN RURAL MISSISSIPPI

Submitted by: Barbara M. Fiaschetti, MSW, LCSW W.G. "Bill" Hefner VAMC Salisbury, NC ----- This is Barbara's first article as a Synergy Roving Reporter.

Debra Todd, P-LCSW, VAMC Salisbury, NC was waiting for the call offering her a social work job at the VA when she heard the Red Cross call for volunteers. In less than a week she was on a plane to Montgomery, Alabama, part of a well-organized relief effort from the Hanford Dole Red Cross office in Salisbury, NC.

The first night of her 3-week duty she stayed in "a seedy little motel," then was shuttled to a vacant K-Mart store that became the staging area for Montgomery. She was deployed with six people she had never met who quickly became a team. They completed their list of assigned tasks-- get a car, get a cell phone, get maps-- and headed to Laurel, Mississippi. The web site for Laurel describes the city as "a Mississippi treasure." Laurel took a direct hit from Hurricane Katrina and sustained heavy damage. Debra's group felt lucky to find a church basement that became home for the next three weeks. Eventually, 70 volunteers took up residence there, sharing a single shower and a few port-a-johns.

Debra's team provided "family services," spending 12-hour workdays filling out forms for people who were applying for Red Cross financial assistance. She recalled endless lines of evacuees with "deer in the headlight" expressions. What surprised Deb was the hope and resilience she saw in those individuals despite their "amazing need."

Around day 8 she began to feel a disconcerting anger. She felt disappointed that her assignment was so far away from the actual Gulf Coast. But in true social work manner, she checked with other volunteers and found that her reactions were normal and common. Each morning by 7:30 a.m. hundreds of clients lined up, in terrific heat with very little water.

"There was no time for the I." She turned to journaling, not a typical practice for her, writing daily about memorable people. Two women clients became part of her journal, she marveled at their inner strength. Both had come from the superdome in New Orleans.

- One had been raped in the dome, so Debra's team connected her with counseling services.
- The other lady had been in the dome with her wheelchair-bound mother and her young daughter. They had to hide their food from gangs with guns.

The volunteers worked in an arena in Laurel, processing 100 people a day at the beginning of their tour. By the end of their tour, they were processing 700 a day. Volunteers came from all walks of life: social workers, retirees, attorneys, college students, business professionals, moms and dads. Deb noted that volunteers with social work experience were able to model social work values, taking on leadership roles. Debra became the supervisor of her group. She felt awed that the volunteers could put programs together in a single day, doing whatever it took to meet people's needs.

Hurricane Katrina was a different crisis experience for Deb because of the greater sense of urgency and stress. However, throughout her time in Laurel she felt safe, and the workers were treated like celebrities. Deb states: "I would do it again."



Roving Reporter

MAKING A FAMILY CONNECTION

Submitted by: Dana Franklin CMSW , Tennessee Valley VAHS, Nashville ---- Interviewed by Victoria Hill MSW, Birmingham VAMC-National PR Committee

During my course of working with the Hurricane Katrina evacuees, I came across a young man that touched my heart and had a lasting impression. "Bill" was a stroke patient and aphasic. A medic-alert bracelet provided his name, the name of the nursing home (NH) and his allergies.

Contacting the NH in New Orleans was out of the question as phone lines were down. During a conversation with **Tonia Hardyway, SW** (also of Tennessee Valley) I was informed that there was another patient from the same NH as "Bill". She had placed this patient in a NH in Nashville earlier that day. I was able to speak with the NH social worker and enlist her help. She talked with this patient who knew about "Bill" and his sister's name. "Bill's" sister had actually worked as an RN in the New Orleans NH where he had been living prior to the hurricane.

I was able to use the Red Cross directory search under the sister's name. I contacted "Bill's" sister in Houston where she had evacuated to her daughter's home. The immediate feeling of relief in her voice was apparent across the phone when I was able to tell her that her brother was safe in Nashville. Not long after this, "Bill's" other sister contacted me. She had been evacuated to Panama City and had located my name through the Red Cross directory. It was a great feeling to be able to not only pass along that her brother "Bill" was safe but that her sister was safe as well. Bringing this family together after such a traumatic event will have a lasting impression on my memory of Hurricane Katrina.

Baby at Berry Hill

Submitted by: Delores Wheeler, LCSW Tennessee Valley VAHC --- Edited by: Erica Taylor, MSW Puget Sound Seattle VAMC. Synergy Asst. Editor

Mr. C and his girlfriend were renting a home in New Orleans when Hurricane Katrina hit. The hurricane destroyed their home and their belongings. Mr. C is a double amputee with an ostomy and his girlfriend was 8 months pregnant. After the hurricane destroyed New Orleans, Mr. C had to be pushed, by his very pregnant girlfriend, in his wheelchair with water up to his chin for several days until they were rescued by boat. The wheelchair had to be left behind so there would be more room in the boat for others. Mr. C and his girlfriend were taken to the Superdome and left without means to move Mr. C. Mr. C's girlfriend was able to transfer Mr. C to a mop bucket with wheels and push him around on it. She was able to push Mr. C to an area where they waited to be evacuated to Lake Charles Hospital by bus. Once they arrived at the hospital, Mr. C and his girlfriend were both placed on IV antibiotics. Mr. C required emergency treatment for conditions related to being in the contaminated floodwaters for an extended period of time. When hurricane Rita came, they were evacuated by plane to the Berry Hill National Guard Air Facility. Mr. C continued to receive treatment for his wounds and open ostomy site. While Mr. C was treated at the medical facility at Berry Hill, staff supported his girlfriend. Hospital staff collected baby shower gifts for the couple. A local church became aware of their story and provided Mr. C and his girlfriend with donated baby clothes. The couple didn't know the gender of the baby, but if the baby was a girl, they were planning on naming her Katrina LaRita. After finishing treatment, Mr. C was discharged from the facility and they are likely living in the Mississippi area with family and their new baby.



Roving Reporter

TENNESSEE VOLUNTEERS

Submitted by Ellen Quigley, Boston VAHCS - This is Ellen's first article as a Synergy Roving Reporter. Tanya Faulk, is also a new Synergy Roving Reporter

*"Your battles fought and victories won.
Your freedom Bought and duty done...
Courageously, without a fear,
You won the name of Volunteer."
Frances Hannah Trantum*

From Tennessee, often referred to as the "volunteer" state, comes another inspiring story of how our VA social workers made a difference in the Hurricane Katrina relief effort. It was a time of great stress and hardship when Mr. and Mrs. G. were airlifted out of their home as a result of the floods following Hurricane Katrina. This disabled veteran and his wife were clearly fearful as they were taken from the only home they knew and flown to a new location. Thanks to the social work staff of the Tennessee Valley VAHCS, their prayers were answered. Although their suffering and loss was enormous they at least

found comfort and sanctuary with the help of staff like **Tanya Faulk, MSW** and **Addie Woods, MSW**.

Addie, the Minority Veterans Program Coordinator and Tanya, the long term care (LTC) SW sprung into action. They assisted Mrs. G. with immediate placement when her husband was transferred to Murfreesboro for LTC. Together, along with many other staff throughout the TN Valley VAHCS they mobilized to provide this patient's wife assistance in locating an apartment close to the VA where she could visit her husband daily. They served as liaisons helping the family communicate with the Red Cross, FEMA and multiple Insurance agencies. They organized a collection of items needed for their new home. They transported Mrs. G. to and from appointments to take care of business for herself and her husband.

We admire the courage, spirit, and tenacity shown by these employees in response to a national crisis. By being there to help this veteran and his family as well as countless others, they exemplify our VA mission as conveyed by President Abraham Lincoln in 1865,

"To bind up the nations wounds: to care for him who have borne the battle..."

" We salute our colleagues at Tennessee Valley VAHCS for their efforts on behalf of our soldiers.

RUSH TO THE AIRPORT

Interviewed by: Victoria Hill, LGSW Birmingham VAMC -National PR Committee

An elderly veteran with dementia, originally from a nursing home in New Orleans, was transported to Houston. He then went to San Antonio, TX, and ended up in the social work care of Iliana Elizardo, MSW, South Texas VHCS. Iliana was able to locate his son, through the Red Cross Registry. He lived in Florida. Through the work of Iliana, she was able to contact the travel office, arrange for a flight to his son's home and confirm the transportation with this veteran's son. However, after the ticket was purchased, the veteran mentioned he was afraid of flying. Then with this issue resolved, or so Iliana thought, she worked on finding appropriate clothing, equipment and suitcases. All this was taken care of with a few hours to spare before leaving for the airport. With the count down approaching for the airport departure, the veteran requested a bath (the plan had been for this to be done the night before but it had not). He was quickly bathed, transported to the airport, settled on board and sent off with good wishes for him and his son. Iliana certainly made a positive difference in this family's life.

RED CROSS RELIEF IN MONTICELLO

Submitted by: Emily Baldwin, LCSW, Durham VAMC --- Edited by: Lisa McGuire, LCSW, National PR Committee

A month after Hurricane Katrina hit, I traveled by plane from Durham, NC to a HUGE Red Cross processing center (an old Kmart building) in Montgomery, AL. At the center all mental health professionals went through a brief training and the next day a group of 15 mental health practitioners were sent to Monticello, MS to open a Service Center (a Service Center is the place where hurricane victims come to receive Red Cross financial assistance). I was with a multi-disciplinary group of professionals (mostly social workers!) from all across the country and they were truly an amazing group.

Clients traveled to Monticello from LA, MS and TX to receive money to rebuild their lives. Some had spent the night in their cars. Some cars carried representatives from up to 5 different families. As word spread regarding the center location, the lines of people seeking assistance got longer. People were understandably upset after sitting in their cars for 10-12 hours in 95-degree heat. As they ran out of food, water, diapers, or baby formula we intervened to defuse the situation by thanking them profusely for waiting in the long line.

There were endless stories of human suffering but most were resilient and determined to move on with their lives. Some needed mental health follow up. I met a couple that had been camping in a tent since the hurricane. They had only brought 3 days worth of supplies. They were hopeful that they could return to New Orleans soon to survey the damage to their home. I came across a few veterans needing assistance and we told them about VA resources, directing them to local VA social workers for assistance.

The mental health team was also tasked with brief crisis intervention for Red Cross volunteers. Many of the Red Cross workers had difficulty dealing with desperate, demanding, and emotionally upset clients. We also provided support to one another, making the experience a professionally and personally valuable.

Nearly one week after we opened the Service Center, the Red Cross closed the center and started referring clients to local Red Cross Chapters. Clients were very upset. Defusing anger became our theme for the day. In the end we opened 6500 cases and over \$4 million was disbursed or promised. I was proud to work with the Red Cross but I was even prouder to tell other volunteers I was a VA employee and my agency supported me in this positive and rewarding experience.

HELPING IN THE AFTERMATH

Submitted by: Johnna K. Matthews, LCSW, PIP Tuscaloosa VA MC



As social workers, we are often called to assist in the most desperate of situations. However, even with all of our training, education, and experience, many of us were not prepared for what Hurricane Katrina bestowed upon our nation.

Tuscaloosa VAMC opened the Hurricane Katrina Response and Recovery Center immediately after evacuees arrived in Tuscaloosa. Our staff visited shelters, campgrounds and local motels to notify veterans and their families about the Center. Social workers volunteered to work on weekends and holidays at the Center. We assisted individuals and families with obtaining medications, made referrals to community agencies for clothing and other necessities, assisted in finding temporary housing and helped in a multitude of other ways. We also provided supportive therapy and crisis counseling for people that came to the Center, helping them make a plan for their immediate needs.

We assisted the Red Cross by providing social workers to help evacuee's complete paperwork for financial assistance. We provided mental health counseling at the Red Cross shelter on the campus of the University of Alabama. We volunteered at local churches that were providing temporary shelter, meals, clothing, personal items, etc. We made donations. We volunteered our homes to displaced VA employees, their families and their pets.

Hurricane Katrina was a true disaster in every sense of the word. But in the center of this historic catastrophe, ordinary people reached out in an extraordinary way. I am proud of the remarkable social workers at Tuscaloosa VAMC.

A COLLABORATIVE EFFORT AFTER KATRINA

Interviewed by Jonathan Pollack, LCSW-R, Albany VAMC - National PR Committee

MISSOURI GERIATRIC SOCIAL WORKERS PLEASE HELP... URGENT NEED FOR SOCIAL WORKERS WITH EXPERIENCE WORKING WITH GERIATRICS AND ALZHEIMER'S...

When **Mary LePage, MSW, MS Gerontology**, a mental health social worker at the St. Louis Missouri VA, received that urgent email sent by NASW on behalf of the Florida Department of Aging, and the Area Agency on Aging of the Gulf Coast requesting the assistance of Missouri area social workers, she felt compelled to take action. Mary quickly volunteered to help, paid her own airfare, used her own vacation time, and was assigned to the Disaster Recovery Center (DRC) in Waveland, Mississippi where the eye of Hurricane Katrina had come ashore only weeks earlier. She was told that the area was "like a war zone" and that she should "be creative in bringing what you might use if you were camping in the wilderness."

Mary reports that she worked in close conjunction with FEMA and the Florida Department of Aging. Her primary week long task was community outreach and, using a vehicle supplied by the Florida Dept of Aging, she set out to find places and services which in many cases no longer existed. Each day at about 6:45am she and six other social workers would leave their hotel in Biloxi, Mississippi and she would drop off her colleagues at different DRCs along the way until finally reaching her destination, Waveland. Mary worked until about 7 or 8pm and then made the return trip.

Although not serving as a VA representative, she did wear her VA nametag, which she claims greatly helped her to connect with many evacuees who were veterans, which she estimated to be between 40-60% of the evacuees. Mary was particularly moved by one case where she was able to assist an 82-year-old man with a thick Cajun accent and a sense of humor in obtaining a housing trailer through FEMA. She was then able to convince a pharmacist at the Biloxi VA to mail this veteran's medications to his local post office where he was able to pick them up. The vet was very pleased and appreciative.

In conclusion Mary states *"The experience was a rich one, too complex and multi-layered to be described easily, and yet, also quite simple in terms of human connection. I am very pleased that I went. God Bless those amazing folks of Mississippi."*

HELP AT THE HORSE RANCH

Submitted by: Serene Sprague, MSW, West Palm Beach VAMC, FL

Although West Palm Beach VAMC (WPBVAMC) was minimally affected during Hurricane Katrina, social workers did become involved in an unusual way.

A Canadian owner of one of the local horse thoroughbred training facilities opened their dorm facilities to displaced people from New Orleans. At least 1,000 to 2,000 people were evacuated to this location. The WPBVAMC sent in their homeless team and enrollment specialist to help. Social workers were part of these early teams. Referrals were made for medical, specialty and mental health services. One social worker on site stated: *"Even though I am licensed and a Certified Traumatologist, I did not sign-up to go to New Orleans....but tonight, I think I was 'almost there.'"*

EXPERIENCES FROM CAMP GRUBER

Submitted by: Juli McNeil-Powell, MSSW, SW Executive and Nanette L. Waller, MSSW, LCSW --- Muskogee VAMC

Juli McNeil-Powell's Story Juli's job was to help coordinate efforts at the medical center to provide social work coverage at Camp Gruber (Camp Gruber serves as the Oklahoma Army National Guard training base for summer field exercises and for weekend training). She went out the first working day of the camp to see what kind of space they had, what things they needed to do the job, and the staffing needed. The following social work staff joined them: **Butch Coward, Desiree Dill, and Bobbi Knack**. They worked closely with FMS (Facilities Mgmt. Service) and their Safety Officer. Although they work under a product line, they felt that their social work staff came together **as a service** in this time of crisis to provide services to the veterans at the camp. All relief workers were very helpful, both those that went to the camp and those that helped the veterans that needed inpatient care at the medical center. A letter of appreciation was received from the Muskogee County Health Department for the social work efforts in helping veterans at Camp Gruber.

"In my work with a few vets at the camp and those that came through our BMS, I was able to get a better understanding of what tragedies these folks actually suffered. It was a very sad situation for all. Many of the vets/families have decided to stay here because they have been treated so well. That says something about our hospitality in the community as well as the VA." – Juli McNeil-Powell

Nanette Waller's Story: I spent four days going out to Camp Gruber to assist with evacuees; it was the tail end of the efforts and many of those left were dual diagnosis veterans. I was asked to escort one veteran who was flying to be with his daughter in Michigan. This veteran had repeatedly asked VA staff to write down simple instructions, and yet he would continue to ask about the same instructions several times a day. I advised staff that the veteran was not capable of handling too much information. He was very anxious about going to the airport. I accompanied him to the Tulsa airport and was given a pass to accompany him to the gate. He was anxious and asked time and again about the flights and change in planes. As he was being wheeled to the plane, he grabbed my hand and then gave me a hug and said he would have never been able to get that far if I had not stayed there with him. This reinforces what we as social workers do – take care of the veterans!!

The experience at Camp Gruber could be enlightening, frustrating, and saddening all at once and took all our social work skills to assist those in transition. Overall, it was a great experience!

SOCIAL WORKERS ANSWER THE CALL

Submitted: Lydia Henderson Chief SW, VA North TX HCS Dallas, Veronica Piper, LMSW Marianna Demko, LCSW Donna McCollum, LMSW Kim Fite-Thurson, LMSW, Jimmie Henderson SW Student

Jimmie Henderson UTA Grad. SW Student provides VA dental referral for Hurricane Rita veteran.



As early as September 1, 2005, when the first group of Hurricane Katrina veterans began arriving at the VA North Texas Health Care System (VANTHCS), Social Work Service was an integral part of providing assistance to our nation's veterans. Social Work Service recognized the importance of having social workers present and available to identify and address the psychosocial needs of veterans upon their entrance into the VANTHCS Urgent Care Center for treatment.

In addition to the social workers volunteering at the VAMC, they went into the community and helped at Dallas County's Convention Center and Reunion Arena where veterans and non-veterans alike were being sheltered, fed, clothed, and consoled. Social workers were also deployed to assist the Waco VAMC.

Of the 250 evacuees, both civilians and veterans, the social workers assisted approximately 30 patients a day with the focus on crisis intervention. The social workers completed initial assessments and initiated discharge planning.

The patients served were faced with a myriad of medical and social issues that required immediate attention including, but not limited to the following:

- Nursing home and assisted living placement
- Alternative living arrangements
- Reconnecting patients who were separated from their family.
- In-home community medical services that needed to be re-established.
- Evacuees who needed assistance in obtaining financial resources
- Transportation and clothing assistance and initiating school enrollment for children

The VANTHCS Social Work Service is proud to have contributed its expertise and efforts to assist veterans in their time of need.

REFLECTIONS: DISASTER RELIEF DEPLOYMENT

Submitted by: Robert Karpinsky, MSW, LCSW, Tomah VAMC, WI

On September 8, 2005 I was sent to Louisiana to assist with Hurricane relief efforts. When I arrived in Alexandria I went to the VA in nearby Pineville, LA. I firmly informed the HR staff there, as I had been informed by my VA, that I was on my way to Jennings. They informed me just as firmly that I would be staying and working at the Alexandria VAMC. There was no further debate on that point. I stayed for 2 weeks.

I was shown my living arrangements in an old section of the facility that night. The next day I met with Tina Eyre, the Chief of SWS. She explained that my assignment was to meet with the 70 or so veterans transferred from the New Orleans VA just a few days earlier. I had the privilege of meeting with a diverse group of "America's finest"—both patients and staff. I remember most vividly a paralyzed, aphasic gentleman in the nursing home, who had a lot to say, but couldn't. His frustration was contagious as he attempted to express himself and, when I think about him, I can still feel that frustration today. Others talked of the fear they felt and the resignation they experienced while awaiting evacuation from the NOVA.

The most gratifying experiences were the ones in which we could help veterans locate and reunite with their families and loved ones. I had the opportunity to see the reactions when it was discovered that a daughter, son or wife had survived.

I met some of the finest and dedicated VA staff from all over the country - from the Alexandria staff to relief staff from Maine to Alaska. Working under great stress, they still took the time to help us feel welcome and comfortable. The Chief of SW set the tone for everyone with her calm and determined manner when others may have been overwhelmed.

I think the most lasting impression I will carry from the experience is the deep sense of sadness and grief experienced by many of the patients I worked with and the near certainty that for many of them this experience is far from over. This is balanced somewhat by the memories of the relief and happiness accompanied by the reuniting of families and the compassion, commitment and competence of the VA staff.

RESPONSE TO HURRICANE WILMA

Submitted by: Terri Anderson, MSW John Cochran St. Louis VAMC --- Interviewed by: Erica Taylor, MSW Puget Sound, Seattle VAMC Synergy Asst. Editor

I was deployed to Miami, Florida on October 29th to provide assistance at a 550 bed for-profit medical center. I worked primarily on the acute medicine floors of the hospital. Most of the work I did involved accessing appropriate resources for patients. This included locating home health services, nursing home placements, medications, and finding family members to assist with care in the person's home. I was struck by the commitment and dedication of the employees at the medical center, some of which still had no electricity in their own homes. These individuals showed up day after day in spite of their own problems and challenges to work in an environment that had many challenges of its own. I discovered that the patients we were working with had almost become accustomed to hurricanes, so much so, that they simply went forward with their work and did what needed to be done. Assisting with the Hurricane Wilma relief efforts required me to be very flexible, creative, and persistent so that resources that were either in short supply or difficult to identify in an unfamiliar environment could be located and provided to those in need. I was proud to be a VA social worker.

INSPIRATION IN ALEXANDRIA

Submitted by: Michael W. Kulick, MSW, LCSW Cleveland VAMC, OH

I was deployed to Alexandria, Louisiana approximately 3 ½ hours from the New Orleans VAMC. I worked at the Alexandria VAMC and two shelters (Nazarene & Sacred Heart) that were supported by the VA. The Alexandria VAMC was overwhelmed by the sudden influx of hundreds of VA employees and veterans. While on duty in Alexandria I assisted with hospital discharge planning, and psychosocial assessments. I assisted patients with locating clothing, finances, discharge planning, connecting with FEMA and the Red Cross. It was rewarding to set a process in motion and see the positive efforts of my work.

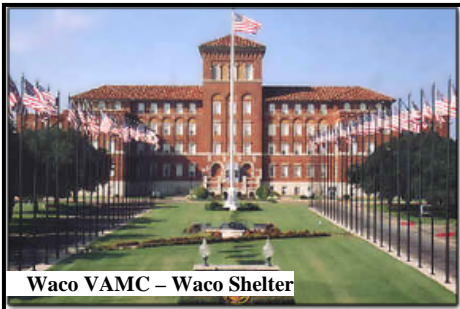
"Mommy helped people
in the water"

There were many evacuees that I remember, here is but a short recall of some that were meaningful to me.

- I met a man who sat on the top of his roof with his dog for 4 days before being brought to an emergency Red Cross shelter. He shared his only bottle of water with his dog. People took his dog in while he was med-evaced to the nearest VAMC
- I met a man who served during Vietnam in the USMC. He lost his brother and many friends during the war. He went to work for the VA and later lost his 4yr old son. After so many losses he was now volunteering 16-18 hour days to help with hurricane relief, helping others through their losses.
- A woman that I met spent hour's hand ventilating a patient and then still had to grieve over the loss of the patient despite her efforts.

I was touched deeply on many levels by the people of the VA, despite the briefness in my own deployment. However, it was my 3 and 4-year-old children's pride in me and how they told their friends and teachers about what I was doing, that summed things up for me. "Mommy helped people in the water." Indeed I did.

THE FEDERAL MEDICAL SHELTERS WACO & MARLIN EXPERIENCES



Waco VAMC – Waco Shelter

Central Texas Health Care System participated in Hurricane Relief Efforts. Approximately 350 evacuees were housed at the **Waco and Marlin Federal Emergency Shelters**. CTVHCS Social Workers (Waco ICF) were instrumental in the early stages of receiving and assessing referrals and resources. As the situation became larger, WACO sent out the call for deployed social workers from other VA facilities. It was truly a team effort on all accounts. The VA Federal Emergency shelters were closed in October.

The following social workers were deployed to either the Marlin or Waco shelters:

Jill Alger, Renee Andreassen, Gloria Boston, Kris Breitag, Brian Brooks, Christopher Buser, Doris Call, David Carlson, Richard Carlson, Linda Clausen, Diana Cole, Ann Costa, Valerie Creedon, Karen Dobritzky, Reginald Duckson, Stephen Eisenreich, Julie Fuller, Leah Goodnow, Donald Hull, Robert Karpinsky, Michael Kulick, Dian Leibel, Shelia Leroy, Lauren Love-Dubea, Sherilda Lyons, Janice Mason, Jeffrey McGee, Angela McIntosh, Kathy Neil, David Portero, Paul Postiglione, Jennifer Ramirez, Erin Siniff, Jennifer Summers, Barbara Surott-Kimberly, Michelle Sobel, Linda Talley, Christine Walker, Craig Wingate



Olin E Teague Veterans' Center – Marlin Shelter

Unless indicated otherwise, all photos in the following articles are taken and printed here with the permission of **Dan Bolton** Acquisitions & Material Management SFVAMC. Thanks Dan

The remainder of the articles are from social workers that were deployed to the Marlin or Waco Shelters

"You guys are social workers? We LOVE social workers here! You guys are awesome, social workers are GREAT !!!

And so goes the late night welcome at the Waco Shelter for three of the newly deployed VA social workers on October 17, 2005.

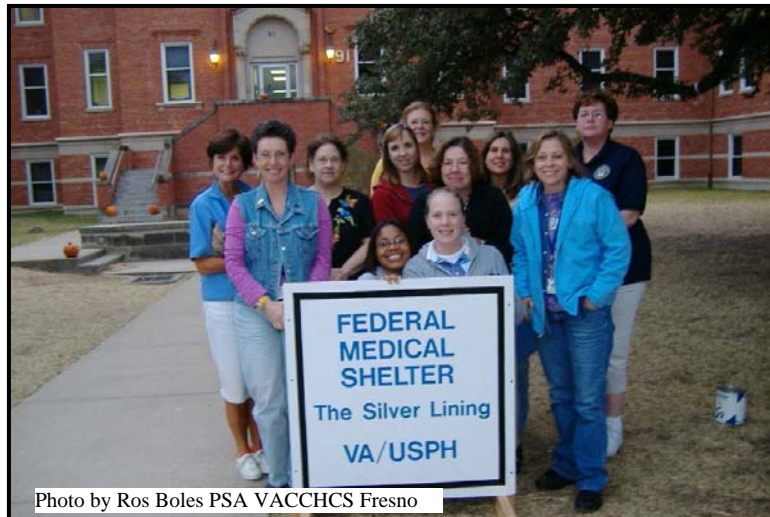


Photo by Ros Boles PSA VACCHCS Fresno

WACO SHELTER

Barbara "Bobbie" Surott-Kimberly- White River Junction, VT, Rosalind "Ros" Boles, PSA -VACCHCS Fresno, CA our "awesome PSA", Leah Goodnow-PVAMC, Philadelphia, PA, Renee Andreassen, GLAHS - West LA Campus Jill Alger – White River Junction, VT Dian Leibel – Danville, IL, Ann Costa – VAMC Long Beach, Janice Mason – Togus, ME, Michelle Sobel – Portland VAMC, Erin Siniff-Iowa City VAMC, Jennifer Summers –Northampton, MA Photos were requested from Marlin Shelter as well, but not submitted.

REMINISCENCES FROM A DISASTER

Submitted by: Dian Leibel, LCSW, Danville VAMC, IL



I am a social worker. From October 17 thru October 30, 2005 I was deployed to the Federal Medical Shelter in Waco, Texas. I flew into Dallas where I met additional VA staff who were also arriving for deployment. We were put into a van for transport to Waco, about a two-hour drive away. We got caught up in a never-ending traffic jam on the freeway, an experience that reminded me again why I hate big cities and cherish the small town life.

Passing Parkland Hospital, brought back a flood of memories of JFK, someone whom I admired and whose death I credit with being the stimulus for my choice of profession.

me, almost suffocating me. I was vaguely aware of a face and a voice to my right telling me to do something but it seemed long seconds before I could make out that I was being told to squirt some disinfectant into my hands. The next awareness I had was that of a voice above the din saying "is there a social worker in the group?" I can next recall being in a room that was alive with sound and motion, being surrounded by people that I believe may have been introducing themselves to me. For the next few minutes we were given a whirlwind tour of the shelter, introduced to some staff, eyeballed rooms referred to as the "command center", "triage", "BB wing", "the rec room", "2A", "2B", "the place with the best toilet." Some forms were filled out, and I came to back in "THE ROOM." "THE ROOM" turned out to be about 25 feet by 25 feet that housed the social work staff, the recreation staff, the chaplains, the transport staff, and the security staff. There were two telephones and one computer. The next couple hours were a nightmare of confusion. I looked at the other social work staff. They all seemed to know exactly what they should be doing and were all actively engaged in doing it. I chewed myself out for foolishly thinking that I knew my craft well enough that I could function in this foreign environment.



Day Two Up with the alarm at 5:30 a.m., ride the van back to the shelter. Somehow my sense of panic was somewhat less acute. "Is it possible that there is some order in this chaos and that I might be able to figure out what the mission is?" Without knowing it, my social work instincts started to kick in. My actions started to become less random, more goal oriented. I read the charts of the evacuees assigned to me, met those that I could track down. I was starting to sense "A PLAN" for what I was supposed to be doing.

Day Three I recall thinking that "Hey, I think maybe I can do this."

Throughout the 14-day deployment, social work staff were arriving and leaving. There were about nine social workers at any one time, two of who were formed into a mental health team.

At the start of my second week, the Marlin shelter was closed and the remaining staff and evacuees were transferred to the Waco shelter. The closure of the Waco shelter was fast approaching. Every day social work staff left for home. I felt so lucky to have been in the company of social workers from all over the country, coming together to do a service. I felt such admiration for their skills. And what was so unbelievable was that every staff person in the shelter recognized and verbalized that the mission of the shelter was accomplished on the backs of the social workers. **SOCIAL WORKERS RULED.**

Most of the evacuees at the shelter were from Hurricane Rita with a few families from Hurricane Katrina. One family was a double evacuee from both Katrina and Rita. Most of the evacuees were from southern Texas. Most had moved three and four times, each time in a northerly direction further and further from home. The youngest evacuee was three months old, the oldest in her nineties.

The deployment was a life affirming experience for me. I feel privileged to have been able to have done this service. Would I do it again? In a heartbeat.



WACO SHELTER - BUILDING 91: THE FIRST DAYS

Submitted by: Lauren Love, LCSW, Syracuse VHA



I am a social worker at the Syracuse VAMC where I work in outpatient mental health. I returned on October 18, 2005 from a two-week deployment at the Federal Medical Shelter in Building 91 at the Waco VAMC, TX. I had been on the DEMPS list for about a year and never truly believed that I would be called upon to serve in any capacity. When I arrived in Waco the shelter had been open for about 5 days and was a busy, bustling place. I had no idea what type of work I would be doing there, but was quickly introduced to the other social workers working there. None of us were from Texas, none of us knew resources in Texas; how were we going to get 177 evacuees of Hurricane Rita home? Where was home?

I quickly learned the geographies of the state of Texas from a large map taped on the wall. I learned about emergency management resources from the other social workers each day as we shared resources we had found. But I learned something much larger. I have always heard "one VA" but I'm not sure I always believed it, but in Waco, I saw it. I saw staff from all over the country come to work every day for 12-13 hours per day, leave exhausted, and come back to work the next day with the same enthusiasm they had on the first day. I met some of the finest social workers while there, sharing the expertise and skills, sharing their ideas, and sharing of themselves with staff and evacuees. I feel honored to have been able to be a part of this humanitarian effort, and I am grateful for the opportunity to serve with such professional and caring social workers. Thank you for a wonderful experience.

A LIFE-CHANGING EXPERIENCE

Interviewed by: Jonathan Pollack, LCSW-R, Albany VAMC - National PR Committee



Karen Dobritzky, a medical social worker from the St. Louis, Missouri VA arrived at an emergency shelter on the grounds of the Waco, Texas VA about twenty-four hours after the shelter had been opened by the U.S. Public Health Service. Karen was particularly amazed to find out from some of the evacuees that the shelter was the fifth one that they had been to following Hurricane Rita in one week's time. A large majority of evacuees she worked with came from shelters such as the one set up in a nearby Wal-Mart. Karen related that the survivors were much more seriously ill and infirmed than those sent to other shelters, such as at the VA in Marlin, Texas and that the vast majority of these evacuees were not veterans.

Karen served for twelve days and worked at least twelve hour days every day assisting many senior citizens who were stroke victims and in need of rehab and housing. She recounted one particularly moving case where she was assigned to work with a homeless woman with

Alzheimer's disease who had no identification and could barely communicate. However, the woman kept repeating the name of a nursing home, which Karen was able to locate and eventually contact. It turns out that the woman was no longer a resident there, but the nursing home was able to provide enough information for Karen to do some detective work. She was eventually able to contact the woman's family and help to reunite the woman with her son.

Karen was particularly moved by the kindness of strangers. She recounts that many people who lived in the local Waco area (i.e., local volunteer fire departments, social workers) assisted greatly in recovery efforts. A VA chaplain helped coordinate the efforts of local church groups as well. She described her trip to the Waco shelter as a "life-changing experience" and stated that "I would go again in a heartbeat."

The VA is both proud and honored to have someone as dedicated and caring as Ms. Dobritzky to call its own.

THANK YOU

Submitted by: Linda Talley, LCSW Tennessee Valley Healthcare System, TN



My two weeks in Waco was the one of the most, if not the most, rewarding experiences I have ever had. This was truly a team effort and one I am extremely proud to have been part of. I have many experiences I will never forget but one stands out in my mind.

We had an elderly resident who could only tell us his name, the city he came from and a woman's first name. We did not know if he had been in a nursing home, living alone or with someone. While at the shelter he was sent to the emergency room several times. It occurred to me that possibly he had been hospitalized in his hometown before the hurricane and that they might have some information about him. I called the hospital to ask about his care there. Because the hospital was not totally up and running they only had access to limited information on patients. They checked and found that this person had a procedure done a few weeks earlier but only had the physician's name who did the procedure. After reaching this physician's office I was told the only information they had was this gentleman's primary care provider. The primary care provider's office had the name of his next of kin, who was the woman he kept asking about, and her telephone number. I made the call and immediately got through and explained the situation. This contact was with the man's granddaughter who was frantic to find out where he was. The relief in the granddaughter's voice when she found that her grandfather

was okay is something I will never forget.

This is what social work is all about and makes me very proud to be a part of this profession and very thankful that the VA gave me the opportunity to share in this experience.

REMEMBERING JESSE

Submitted by: Kathy Oldham, LCSW/CADC Wilmington VAMC, Delaware

I recently had the privilege of serving our fellow United States citizens in one of the Federal Medical Shelters that was established to aid evacuees of the Katrina and Rita Hurricanes.

I was asked if I was still interested in being deployed and said I was. I was told a few days later that I would most likely be sent to Houston, Texas. Houston area social workers were helping to place New Orleans and Mississippi evacuees in the Houston community.

When the travel clerk in my VA called and told me I would be going to Marlin, Texas- I thought she was crazy. Marlin? What on earth would I be doing in Marlin, Texas and just where is that? While I was packing to go there, I was thinking to myself all of the things that I was going to do for "those poor people." I had some sort of idea in my head about what good I would be doing and how noble of a cause this was. And YES, wasn't I just so special for volunteering to do this for "them."

Well, I now think of Marlin, Texas as a little slice of Heaven. Let me tell you why! When I arrived in this very bright and cheerful place, the residents were the ones who were doing things for us. As I sat with some of the residents they taught me the resilience of the human spirit. They were in a place, not of their own making or choice, but were happy to be there and safe. They were grateful to have landed in a place where people from all over these United States would volunteer to come to help them get back to their homes.

There was one elderly resident named Jesse. She was 79 years old and had the most pleasant disposition. She would sit outside in the courtyard each afternoon, taking in the sunshine and sights of the day. She asked me where I came from; when I told her Delaware she was quite surprised. She was tickled to know that someone from so far away would come to Texas to help her and the other evacuees. We shared a few moments that I will always be proud of. I must say that no other experience I had while at this shelter meant more to me than the daily talks I had with Jesse. She was one of the last people that I helped to get back home before my tour of duty ended. I think to myself when I am making dinner,

"I wonder what Jesse is having for dinner tonight?"

I had the opportunity to work with wonderful social workers from New York, Wyoming, Austin, Chicago, Kentucky, Tennessee, Rhode Island and many other states. I also worked with some of the best and brightest of all other disciplines. I need to say that I have great respect for the people with whom I served. I saw and practiced the motto of "One VA."

I am proud to say that I was involved in this first undertaking of volunteer service our System has attempted – it was a great success.

THOSE AMAZING SOCIAL WORKERS

Submitted by: Paul Postiglione, LCSW-R, Albany VAMC, NY



I will always be grateful for the experiences I have had, as a result of this "volunteer duty." I have also, forever been changed, I would recommend this to everyone. If you get a chance to experience this kind of helping, DO IT!

I was deployed to the Marlin Shelter where I worked with some of the finest social workers I have ever met. I have worked numerous disasters through the Red Cross, the last one being the World Trade Center for three weeks.

At this deployment, social workers were tasked with developing discharge plans for evacuees who had no resources in an environment we were not familiar with. The teamwork was wonderful, as we watched each other find our way through systems we knew nothing about. The social workers were viewed by **all** staff as valuable and appreciated because we had the difficult job of coming up with dispositions that were challenging. (Some were envious because of the tangible things we were able to provide, beyond just talking to the evacuees). The main goal for most of the evacuees was to get home, and social workers were key in attaining that goal.

I worked on discharge planning for the evacuees who were difficult to place, because of medical or physical complications. I worked with one mother and son who were stranded in New Orleans on a bridge for 6 days and sent to a number of different shelters. They were pretty traumatized, watching people commit suicide by jumping off the bridge and observing gunfights and many arguments. Her son was having seizures the whole time they were stranded there. It was awful to hear what happened to them and the struggle of going to 6 different shelters and 4 different schools for her son. I was successful in getting them an apartment and had it furnished through donations from a local church and their FEMA check. Working with VA staff all over the country was a pleasure. There were many different disciplines, all of whom commented on the difficult job social workers had and the talent they brought to this deployment.

Working on a team who REALLY WANTED TO BE THERE was a great experience. The cooperation and support was felt with everyone there. Despite the difficult setting, awful hotels and various illnesses that floated around the workers, it was very a rewarding experience and I feel blessed to have had the opportunity to go. I would welcome it again.

DOING WHATEVER IT TAKES

Submitted by: Rick Carlson, LCSW, VAMC Milwaukee, WI



Wal-Mart Warehouse Shelter

I was deployed to the Federal Medical Shelter at Marlin, Texas from October 7 – October 18. I have never been prouder to be a VA social worker.

When I arrived at the Marlin Federal Medical Shelter on October 7, there were over 150 hurricane evacuees. When I left on October 18, there were less than 50. Over 100 people had been returned to their homes, after spending weeks in multiple shelters throughout southern Texas. Most had come to Marlin from either a Wal-Mart warehouse shelter or a Levi-Strauss warehouse shelter in San Antonio.

When the first group of VA social workers arrived in Marlin, we were told that this was to be the last shelter for these residents; from here, the evacuees were to return to their homes, or we were to help them

find new homes.

The residents were evacuees of Hurricanes Rita or Katrina, and in some cases, both. Some residents had fled Louisiana and the destruction left by Katrina for the "safety" of Texas, only to be struck again, this time by Rita.

I was assigned to work with a group of 23 shelter residents, although due to the very fluid situation there, we assisted anyone who came in search of help. Our duties seemed to change from day-to-day, sometimes from hour-to-hour. We called our duty, "by-the-seat-of-your-pants social work." I worked with clients who ranged in age from 2 to 84. Perhaps the most challenging case I encountered came on my next-to-last day.

An 87-year-old confused gentleman had arrived at the shelter on October 4, without family or friends, but was never admitted. He arrived with multiple medical problems and was transferred to the local community hospital in the City of Marlin. After several days at the hospital, he was sent to a community nursing home in Marlin but returned to the hospital later as his condition declined. He was in renal failure and was unresponsive when admitted back to the hospital. There was extremely little information on this man, and the shelter director wanted social work to find next-of-kin and any background information. (As it turned out, we had been given an incorrect spelling of his last name and an incorrect social security number). I was given a van to drive and instructed to find information on this man before the day was out. Neither the hospital nor the nursing home employed social workers. I was told nurses and administrative staff handled "those duties;" these facilities had no listing of family members or any previous medical history. By the end of the day, I was able to locate and speak with a son (next-of-kin) and have him speak directly with staff at the hospital. I also located a DPOA-Health Care document and faxed it to the hospital. (*Key piece of info that got things rolling: the gentleman lived in public housing in Port Arthur.*)

My fellow social workers at Marlin were fantastic; they all shared in the "whatever it takes, we can do it" approach.

I was proud to be a part of our social work team.

HELPING OUT: A 2001 POLICE LOG ENTRY

Submitted by: Jill Alger, MSW, White River Junction VAMC, VT Jennifer Summers, LICSW, Northampton VAMC, MA

Jill and I shared what was referred to as the "BB" unit at the Waco Shelter. Although our experiences were varied, we did share some of the same residents. Teaming together worked as a good approach on placing some of the more medically and physically challenged residents of the unit. One resident that we both remember working with was Miss Elizabeth, greeting everyone with a "Hi, Sugar" in her deep southern accent.

Miss Elizabeth was a 94-year-old woman with dementia; she insisted that she was 87. Her Medicare card was her only form of ID. When Jill and I arrived on "BB" we had received "valuable information" into the life of Miss Elizabeth and her family. She apparently had sisters. Jill tried to locate anyone in Beaumont or Port Charles and I went to locate her 2 sisters. Unfortunately, her "sisters," ended up being the two ladies sharing her current room. Jill had been in touch with the Beaumont police, requesting that they put a note on her home with the shelter number. We heard nothing. The Red Cross had no names. Miss Elizabeth, in one of her more aware moments, was able to give us the first name of a niece and the first name of her real sister. Jill called the Beaumont police department again.



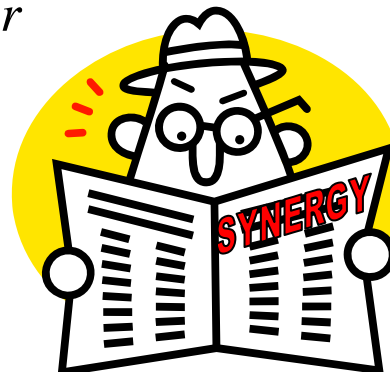
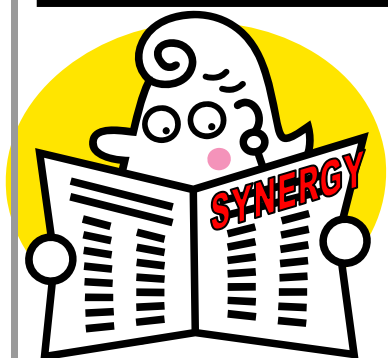
It is truly amazing that the Beaumont police, after speaking with Jill the first time, decided to go through their logbook entries. They found an entry in the logbook dated in 2001 where Miss Elizabeth's nephew had been concerned when he went to his mother's home (Miss Elizabeth's sister) and did not get an answer. The nephew had gone to the police to report his concern. The police made note in their log. Along with the entry was a number for the nephew. I called the number, which transferred me to another cell phone belonging to Miss Elizabeth's niece. She was so excited and happy to know that Miss Elizabeth was okay although quite puzzled at how she got to Waco, TX. In a matter of minutes Miss Elizabeth was able to talk with her niece and her sister, nearby staff were overwhelmed with emotion listening to her speak with her family for the first time since the Hurricane. Although Miss Elizabeth

was not able to return home due to her care needs, Jill was able to arrange for nursing home care close to her family.

This was a first time deployment for both of us. The opportunity to work with the most caring and committed social workers (including Waco VA social workers), nurses, doctors, administrators, clerks, housekeepers, cooks, and drivers from around the country added to our experience. When others talk of one VA, our experience at the Waco Shelter demonstrated how employees from many VA's came together as one. This was an experience not soon forgotten, but long remembered.

SOCIAL WORKERS MEETING THE CHALLENGE

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